



## AARGUS AIR CHARTER CREDIT CARD FORM

Card # \_\_\_\_\_ Type Card \_\_\_\_\_ Exp Date \_\_\_\_/20\_\_\_\_

Name on Card \_\_\_\_\_

Contact E-Mail: \_\_\_\_\_

Card Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_

### ADDITIONAL TERMS

**We will place a HOLD ONLY on your credit card for the quoted amount. If terms below are met, it will result on no fees of any kind on your credit card account.**

1. Our standard terms are 10 days from mailing date of invoice. Please mail check and we will remove HOLD on credit card. If check not received within 10 days of trip date, credit card will be charged with processing fees of 4% will be added to invoice amount.

*(We will attempt to call you before we proceed with a card charge)*

2. All flight cancellations will be charged a flat fee of 10% of original invoice amount if less than 24 hours from departure time.

Your name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE RETURN BY FAX TO 616-608-3869  
OR SCAN AND EMAIL TO  
grr20@aargus.com**